## **REMARKS**

Reconsideration of this application, as amended, is requested.

Claims 1, 6, 7 and 17-20 and 22 remain in the application and under consideration. Claims 5 and 8-16 are withdrawn in view of an election made earlier in the prosecution. Claims 2 and 3 were canceled earlier in the prosecution. Claims 4 and 21 have been canceled with this Amendment. Claim 1 has been amended to incorporate the limitations that had been in claim 4. Claim 17 has been amended to define the invention more clearly.

Claim 4 had depended directly from claim 1. Hence, the amendment to claim 1 to incorporate the limitations of claim 4 does not raise issues that require further consideration or searching by the Examiner and should be entered after final rejection. The minor clarifying amendment to claim 17 also does not raise issues requiring further consideration or searching by the Examiner and should be entered after final rejection.

The Examiner objected to the Information Disclosure Statement filed on August 29, 2008. The Examiner noted that 37 CFR 1.98(a)(2) requires a legible copy of each cited foreign patent document, each non-patent publication and all other information that caused the reference to be listed. Accordingly, the Examiner placed the Information Disclosure Statement in the file but indicated that the information referred to therein has not been considered.

The August 29, 2008 Information Disclosure Statement was filed electronically with a copy of the Japanese office action, an English translation of the Japanese office action and copies of the six references cited by the Japanese Patent Office along with their English language Abstracts. The Electronic Acknowledgement

Receipt received by the undersigned attorney for the applicants confirms that all of the references were filed and received. Additionally, PAIR includes an August 29, 2008 entry referring to each of the Japanese references cited in the Information Disclosure Statement and the Japanese office action in which the references were cited. Accordingly, it is submitted that the applicants have complied with 37 CFR 1.98(a)(2). The Examiner is requested to consider the references cited in the August 29, 2008 office action and to make those references of record.

Claim 17 was rejected under 37 USC 112 first paragraph. The Examiner interpreted previously presented claim 17 as requiring two hung members and two suspenders. Claim 17 has been amended slightly and now clearly defines only one hookshaped member and one ring-shaped member. It is submitted that this minor clarifying change to claim 17 does not add new matter and merely ensures that the claim language conforms to the specification. Amended claim 17 is believed to conform to 35 USC 112, first paragraph.

Claims 1, 4, 6, 7, 20 and 21 were rejected under 35 USC 102(b) as being anticipated by Bujan (US 3,107,745) or alternatively under 35 USC 103(a) as being obvious over Bujan. Claims 17-19 and 22 were rejected under 35 USC 103(a) as being obvious over Bujan.

The newly cited Bujan reference relates to a spring scale that can be used with a conventional gravity feed infusion bag 22 that enables a liquid in the infusion bag to flow by virtue of gravitational forces from the bag 22 to the patient. The spring scale 10 of Bujan includes a tubular body 24 and an elongate tubular member 36 that is telescoped into the tubular body 24. A spring 110 extends substantially along the length of the tubular

member 36, and hence within the tubular body 24. A first bail 14, which appears to be made of wire, extends through an opening in the top of the tubular body 24 and is hooked into engagement with a top end of the spring 110. A second bail 20, which also appears to be formed from wire, is engaged with the lower end of the spring 110 and projects down below the bottom end of the tubular member 36. The Bujan device is employed with a vertical standard 18 that has a horizontal supporting member 16 extending therefrom. The first bail 14 is hooked over the supporting member 16. A conventional IV bag 22 then is hooked to the second bail 20 so that the IV bag 22 can be suspended above and close to the patient. Liquid from the IV bag 22 then is fed by the force of gravity from the IV bag 22 through the tube 23 and into the patient. The Bujan scale 10 and the associated standard 18 and IV bag 22 must remain fairly permanently positioned near and gravitationally above the patient. Bujan has no suggestion of an arrangement for a portable scale that can be transported to another patient in a health care facility for quantifying a remaining amount of medical liquid stored in another IV bag. In particular, any disengagement of the scale 10 shown in Bujan from either the standard 18 or the IV bag 22 would leave the patient without any means of receiving the liquid that must flow gravitationally down from the IV bag 22 to the patient. Any disengagement of the bails 14 or 20 from the scale 10 is not suggested in Bujan and would require a complex reengagement of the bails 14 and 20 with the ends of the spring 110 disposed internally of the tubular body 24 and the tubular member 36.

In contrast to Bujan, the invention defined by amended claim 1 and claim 20 relates to a medical liquid feeding unit with a medical liquid feeding device including an expandable container, an inlet port for supplying a medical liquid into the expandable

container and a feed duct for feeding to a patient the medical liquid discharged from one end of the expandable container by a contractive force of the expandable container. Thus, unlike Bujan, the claimed invention relies upon the contractive force of the expandable container for feeding the medical liquid to the patient and does not require the medical liquid feeding device to be suspended gravitationally above and near the patient. This difference is significant in that a health care facility often is a hectic environment with healthcare personnel requiring access to a patient. The Bujan assembly with a vertical standard 18, a spring scale 10 and an IV bag 11 maintained near and gravitationally above the patient can significantly impede access to the patient. Furthermore, the visually obtrusive assembly of the vertical standard 18, the scale 10 and the IV bag 22 above and near the patient is very discomforting to the patient and is not consistent with objectives of keeping the patient comfortable and in a relaxed state while receiving medical attention. Amended claim 1 and previously presented dependent claim 21 further recite a cordshaped connection member adapted, when the suspender is disengaged from the medical liquid feeding device to maintain the connection between the medical liquid meter and the medical liquid feeding device. The cord-shaped connection member allows the medical liquid meter to be used as necessary for quantifying a remaining amount of the medical liquid stored in the expandable container periodically as desired or needed. However, the cord-shaped connection member enables the medical liquid meter and the medical liquid feeding device to be maintained in a substantially unobtrusive location where neither the medical liquid feeding device nor the medical liquid meter will impede access to the patient or create discomfort for the patient.

The claimed assembly of the medical liquid feeding device, the medical liquid meter and the cord-shaped connection member enables an assembly that is much more portable and versatile than Bujan. The spring scale 10 of Bujan always is used to connect the IV bag 22 to the vertical standard 18. Disconnecting the spring scale 10 from the IV bag 22 and/or the standard 18 requires the health care worker to provide some other means for connecting the IV bag 22 to the vertical standard 18 at a position above and near the patient. Bujan clearly envisions a scale for each patient and each IV bag. In contrast, the claimed invention is much more portable and permits the health care worker to use the medical liquid meter at any desired location in the health care facility. Furthermore, the claimed invention is more versatile in that a health care worker could choose to rely upon the cord-shaped connection member to keep the liquid meter in close proximity to the medical liquid feeding device even when the remaining amount of the medical liquid stored in the expandable container is not actively being measured and even while the medical liquid feeding device is not suspended above and near the patient. Thus, the cord-shaped connection member optionally can be used to keep the medical liquid meter near the medical liquid feeding device even though none of these devices are interfering with the ability of medical personnel to tend to the patient and even though none of these devices are visually apparent to the patient. This contrasts to the Bujan assembly of a vertical standard 18, a scale 10 and an IV bag all suspended above and near the patient. Accordingly, the invention defined by the remaining claims provides portability, versatility and ease of use without encumbering healthcare personnel working near the patient and without imposing upon the patient in a way that would create discomfort. In view of these differences, it is submitted that the invention defined by the amended and previously presented claims that remain in the application is not taught or suggested by Bujan. The Examiner is urged to contact applicants attorney at the number below to expedite the prosecution of this application.

Respectfully submitted,

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